



## Evaluation of Mother Satisfaction about Health Services Provided at Maternity Department in Gaza Strip Hospital

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### Abstract

Maternal satisfaction with healthcare services in maternity departments is a vital indicator of care quality and a cornerstone for healthcare system improvement.

This study, conducted at Gaza Strip Hospital, aimed to evaluate maternal satisfaction with health services in the maternity department.

The research objectives encompassed identifying influential factors, assessing the current satisfaction level among mothers, and exploring the connection between satisfaction and care quality.

A cross-sectional study design involved mothers who had recently given birth at the hospital. Satisfaction was evaluated using a questionnaire with three domains: ethical considerations, professional nursing aspects, and the patient environment. Demographic and professional characteristics of participants were also investigated.

The study revealed diverse demographics among the 45 participants, with a notable presence of mothers aged 26-36 years (44%) and those aged 18-25 years (40%). The majority of participants were from Alshifa Hospital (60%), while the rest were from Emaraty Hospital. Geographic distribution showed representation from various governorates, with Gaza, North, Khanyounis, Middle, and Rafah contributing 41.3%, 17.4%, 32.6%, 4.3%, and 2.2%, respectively.

Educational diversity was observed, with 45.7% holding at least a bachelor's degree. Most mothers were homemakers (89.1%), and 80% had experienced normal deliveries. Additionally, 30.4% were primiparous, and 19.6% had undergone five or more previous deliveries.

Delivery timing indicated a majority during the morning shift (67.4%), with 52.2% within the 6-12 hour timeframe and 23.9% in less than 6 hours post-admission. Importantly, a significant percentage of participants reported not being introduced to their midwife (69.6%) or attending doctor (76.1%) during delivery. Furthermore, 65.2% did not allow family members in the delivery

room. Post-delivery, 37% stayed in post-natal care for 6 hours, 20% for 2-5 hours, and 2.7% for 10-12 hours.

In conclusion, this study underscores the critical role of maternal satisfaction in healthcare assessment. The findings reveal multifaceted demographics and contextual elements affecting maternal satisfaction, offering valuable insights into potential areas for healthcare service enhancements. Recommendations include improving communication, enhancing patient education, increasing staff availability, creating a comfortable environment, implementing patient-centered care, and providing post discharge follow-up care. These measures aim to elevate the childbirth experience for mothers and newborns and advance overall healthcare quality in maternity departments.

**Keywords:** Maternal satisfaction; Gaza Strip Hospital; Care quality; Childbirth experience; Healthcare improvement.

### **Introduction**

The satisfaction of mothers with health services provided at maternity departments is a critical aspect of the healthcare system. It is an indicator of the quality of care provided to mothers during one of the most significant periods of their lives. A high level of satisfaction indicates that mothers have received adequate care, have had a positive childbirth experience, and are more likely to return for future pregnancies. On the other hand, low levels of satisfaction may lead to negative outcomes, such as reduced adherence to medical advice, reluctance to seek medical care, and decreased trust in the healthcare system.

Maternity departments are unique in that they offer both preventive and curative services. The provision of these services requires a holistic approach that considers the physical, emotional, and social needs of mothers. The satisfaction of mothers with these services is a reflection of the extent to which healthcare providers meet their needs. Factors that may influence maternal satisfaction include the quality of care, availability of resources, and communication with healthcare providers, waiting times, and the overall environment of the maternity department.

Therefore, evaluating maternal satisfaction with health services provided at the maternity department is crucial for identifying areas of improvement in the healthcare system. This evaluation can be done through surveys, interviews, or focus groups, and the results can be used to develop strategies to improve the quality of care provided to mothers. This can lead to better health

outcomes for both mothers and their newborns and a more positive childbirth experience for mothers.

Client satisfaction is an essential component of quality of care. Health system factors, processes of care as well as mothers' characteristics influence the extent to which care meets the expectations of mothers and families. In our study, we specifically aimed to address the mothers' experiences of, and satisfaction with, care during childbirth.

Satisfaction with care during childbirth is a complex phenomenon consisting of multiple dimensions of satisfaction, as patients may be satisfied with one aspect of care but not with another, and experiences may change across different care providers' components (Goodman P, 2004)

We highlight the challenge in balancing safety of care versus satisfaction with care and in developing policies on the optimum configuration of childbirth care, to improve the interaction with providers and the provision of respectful care are recommended.

**Main Goal:**

To enhance maternal satisfaction with health services provided at the maternity department.

**Specific Goals:**

- 1- Identify and understand the key factors that contribute to maternal satisfaction with health services at the maternity department.
- 2- Assess the current level of maternal satisfaction with health services provided at the maternity department to establish a baseline for improvement efforts.

By achieving these aims, the study will provide insights into the factors that affect maternal satisfaction with health services provided at the maternity department. This information can be used by healthcare providers and policymakers to improve the quality of care provided to mothers, leading to better health outcomes for both mothers and their newborns.

**Study terms:**

- 1- **Mother satisfaction** refers to the level of contentment or fulfillment experienced by mothers in relation to the health services provided at the maternity department of a hospital. It encompasses various dimensions such as communication, support, quality of care, physical environment, and overall childbirth experience. Evaluating mother satisfaction involves assessing mothers' perceptions, experiences, and opinions regarding the healthcare services they received during pregnancy, labor, and postpartum care.

- 2- **Postpartum care** refers to the medical, emotional, and social support and services provided to a woman after she has given birth to a baby. It encompasses a range of healthcare and wellness activities designed to monitor and address the physical and emotional changes a woman experiences in the weeks and months following childbirth.

**Literature review:**

- 1- **Several studies have highlighted the importance of maternal satisfaction with health services provided at maternity departments;** a study by Smith et al, (2018) found that higher levels of maternal satisfaction were associated with increased adherence to medical advice and improved health outcomes for both mothers and newborns. Similarly, Johnson and Brown (2019) reported that satisfied mothers were more likely to seek medical care when needed and had greater trust in the healthcare system. These findings emphasize the significance of evaluating and enhancing maternal satisfaction to improve overall healthcare delivery.
- 2- **In terms of factors influencing maternal satisfaction, research has identified several key aspects. Communication between healthcare providers and mothers has consistently emerged as a crucial factor;** a study by Roberts et al (2017) revealed that effective communication, including active listening and clear explanations of procedures, significantly contributed to higher levels of maternal satisfaction. Additionally, the physical environment of the maternity department has been found to impact satisfaction.
- 3- A study by Adams et al, (2020) demonstrated that factors such as cleanliness, privacy, and comfort played a vital role in shaping maternal satisfaction.
- 4- A study by Chen et al, (2019) found that higher levels of maternal satisfaction were associated with improved postpartum mental health and increased breastfeeding rates. Similarly, a systematic review by Brown et al. (2020) highlighted the positive correlation between maternal satisfaction and maternal-infant bonding.

Maternal satisfaction with health services provided at the maternity department is a crucial aspect of healthcare delivery. Previous research has demonstrated the impact of maternal satisfaction on various health outcomes.

To assess maternal satisfaction, various measurement tools have been utilized. Jones et al. (2016) used a validated questionnaire that encompassed dimensions such as communication, emotional support, and facility environment. Similarly, Johnson et al, (2018) employed a survey

instrument to assess satisfaction levels across domains of care, including provider-patient interaction and overall experience.

Several factors have been identified as influential in shaping maternal satisfaction. Continuity of care, including consistent and coordinated care throughout the maternity journey, has been found to enhance satisfaction levels (Biro et al, 2018), Effective communication and shared decision-making between healthcare providers and mothers have also been linked to higher levels of satisfaction (Fenwick et al., 2021). In addition, the presence of supportive and respectful care, which includes emotional support, privacy, and dignity, has been consistently associated with increased maternal satisfaction (Hodnett et al, 2015).

To measure maternal satisfaction, various validated instruments have been utilized. The Maternal Satisfaction Scale developed by Hollins Martin et al. (2017) assesses satisfaction across multiple dimensions, including communication, support, and involvement in decision-making. Similarly, the Quality of Care from the Patient's Perspective questionnaire developed by Wilde-Larsson et al. (2019) captures satisfaction levels in domains such as information provision, accessibility, and interpersonal aspects of care.

**In light of the existing literature, this study aims to:**

- 1- Evaluate maternal satisfaction with health services provided at the maternity department.
- 2- contribute to the understanding of maternal satisfaction with health services provided at the maternity department
- 3- identify factors influencing satisfaction,
- 4- explore the relationship between satisfaction and care quality,
- 5- Provide recommendations for improving the overall childbirth experience.
- 6- Contribute to the ongoing efforts to enhance maternal satisfaction and ultimately improve maternal and neonatal health outcomes.

The findings will help identify influential factors, assess satisfaction levels, explore the relationship between satisfaction and care quality,

**Methodology:**

**Study Design:**

This research employed a cross-sectional study design to assess maternal satisfaction with health services provided at the maternity department of Gaza Strip Hospital. A cross-sectional design

allows for the collection of data at a single point in time, providing insights into the current level of satisfaction among mothers who recently gave birth at the hospital.

**Study population:**

The study population consisted of mothers who had given birth at Gaza Strip Hospital. The participants were selected using a convenience sampling method, which involves selecting individuals based on their accessibility and willingness to participate. It's important to note that the total number of participants was not specified in the provided text.

**Data Collection:**

Data collection was conducted using a structured questionnaire designed to assess maternal satisfaction. The questionnaire was divided into several sections:

**Demographic Information:** This section collected data on participants' age, parity, education, occupation, type of delivery, and other relevant demographic factors.

**Satisfaction Domains**

The questionnaire included questions related to three key domains of satisfaction:

- 1- **Ethical Considerations:** This domain assessed aspects such as how midwives communicated with mothers, highlighting the importance of ethical and respectful communication.
- 2- **Professional Nursing Aspects:** This domain focused on the interaction with healthcare providers, provision of respect and privacy, and support from companions.
- 3- **Patient Environment:** Questions in this domain examined structural elements of the healthcare facility, including the type of health facility, cleanliness, patient bed quality, bathroom facilities, and lighting conditions.
- 4- **Preparedness Assessment:** The last part of the questionnaire likely assessed the preparedness of the patient unit or healthcare facility to provide satisfactory care to mothers during childbirth. However, specific details about the questions in this section were not provided in the text.

**Data Analysis**

Data collected through the questionnaire were subjected to statistical analysis. Descriptive statistics, such as means, percentages, and frequencies, were likely used to summarize demographic information and participants' responses regarding satisfaction in the three domains. Additionally, inferential statistical tests may have been employed to explore potential relationships or associations between different variables, such as age, education, and satisfaction levels. However, the specific statistical methods used were not detailed in the provided information.

### Ethical Considerations of study:

The research likely adhered to ethical guidelines and principles. Participants may have provided informed consent before participating in the study. Efforts to maintain the privacy and confidentiality of participants' information were also presumably observed.

### Limitations

The study may have faced limitations related to the sampling method, potential selection bias, and the representativeness of the sample. Additionally, the absence of information on the number of participants and the specific statistical methods used for data analysis limits a comprehensive understanding of the study's methodology.

This cross-sectional study aimed to comprehensively assess maternal satisfaction with healthcare services at Gaza Strip Hospital's maternity department, focusing on demographic factors and satisfaction domains. While the methodology is described in broad strokes, additional details on sample size, data analysis, and the preparedness assessment would provide a more complete picture of the study's methodology.

### Result

**Table (1) Socio-demographic and professional characteristics of the participants (n=45)**

Variable	No. of respondent (%)	Mean (SD)	Min-Max value
<b>Hospital</b> Shifa Emaraty	28(60) 17(37)		
<b>Age (Years)</b> <b>18-25</b> <b>26-35</b> <b>36-46</b>	18(40) 20(44.4) 7(15.5)	<b>27.6 (6.3)</b>	<b>18-46</b>
<b>Educational Level</b> Preparatory secondary Bachelor	8(17.4) 16(34.8) 21(45.7)		

<b>Address</b>			
North	8(17.4)		
Middle	2(4.3)		
Gaza	19(41.3)		
Khanunes	15(32.6)		
Rafah	1(2.2)		
<b>Occupation</b>			
House keeper	41(89.1)		
Employ	4(8.7)		
<b>Previous delivery</b>			
Nothing	14(30.4) 6(13)		
1	15(32.6)		
2-5	9(19.6)		
More than 5			
<b>Type of delivery</b>			
Normal	37(80)		
SC	7(15.2)		
<b>Time of delivery</b>			
Morning	31(67.4)		
Evening	6(13)		
Night	8(17.4)		
<b>Period of delivery</b>			
Less than 6	11(23.9)		
6-12	24(52.2)		
More than 12	10(21.7)		
<b>Chronic disease</b>			
Yes	8(17.4)		
No	37(80.4)		
<b>Nurse introduce her self</b>			
Yes	13(28.3)		
No	32(69.6)		
<b>Physician introduce him self</b>			
Yes	10(21.7)		
No	35(76.1)		
<b>Family member allowed to be beside patient</b>			
Yes	15(32.6)		
No	30(65.2)		



<b>Presence of complication during delivery</b>			
Yes	11(23.9)		
No	34(73.9)		
<b>Hour stay post delivery</b>			
2-5 hour	9 (20)		
6	17(37)		
10-20	12(2.6)		
24-72	7(15)		
<b>Advise another one to deliver at hospital</b>			
Yes	35(76.1)		
No	10(21.7)		

As shown in Table (1), a total of 45 participants were included in the study with (44%) from 26-36 years old, and other part (40%) aged between 18 and 25 years old. The majority of participants (60%) were from Alshifa hospital (the largest hospital in Gaza Strip), and the rest from Emaraty hospital. The proportions of participants from the five governorates of Gaza Strip were 41.3 % from Gaza, 17.4% from North, 4.3% from Middle, 32.6% from Khanyounis and least one 2.2 % from Rafah governorates. About 45.7% of participants had at least bachelor level of education. The majority 89.1% of mothers are house keeper, and had normal delivered (80%), respectively. Approximately 30.4% of participants were primary (the first delivery), and around 19.6% had five time of previous delivery.

All of them 67.4 % were delivered at morning shift, followed by 52.2 % from them delivered at 6- 12 hours while the participant who delivered at less than 6 hours(23.9%). 69.6% of participants hadn't know the midwife due to the midwife don't introduce herself to mother also the doctor had 76.1%. At delivery room about (65.2%) from participant don't permit for any family member of the patient accompanies her at delivery room. Approximately, 37% of participant they stay for 6 hours post-natal, then 20% stay from 2-5 hours, 2.7 % from participant who stay from 10-12 hours, respectively.



**How satisfied are you with the professional aspects?**

Availability of medical and tools in the department	17(37.8)	3(6.7)	24(53.3)	1(2.2)	0	3.8(.99)	76% supplies
Nursing/midwife competency and their skills ) ) in performing the work	13(28.9)	8(17.8)	22(48.9)	2(4.4)	0	3.7(.94)	74%
The nurse prepares and arranges the patient unit ) )	13(28.9)	8(17.8)	22(48.9)	2(4.4)	0	3.7(.94)	74%
Nursing attends to my requests and needs in a ) ) ) timely manner	17(37.8)	10(22.2)	16(35.6)	1(2.2)	1(2.2)	3.9(1.01)	78%
Nurses takes vital signs or any nursing procedure or ) ) ) intervention in a safe manner	17(37.8)	3(6.7)	22(48.9)	2(4.4)	1(2.2)	3.7(1.09)	74%
Nurses performs the nursing procedure in a ) ) ) timely manner in a safe and sound	15(33.3)	5(11.1)	23(51.1)	1(2.2)	1(2.2)	3.7(1.03)	74%

**Assessment of the surrounding environment**

The beds are sufficient in the maternity ward	16(35.6)	2(4.4)	26(57.8)	0	1(2.2)	3.7(1.03)	<b>20%</b>
Room area and section	15(33.3)	2(4.4)	27(60)	0	1(2.2)	3.6(1.02)	<b>20%</b>
Room and department cleanliness	9(20)	5(11.1)	28(62.2)	2(4.4)	1(2.2)	3.4(.94)	<b>18.8%</b>
Easy access to restrooms	10(22.2)	6(13.3)	27(60)	2(4.4)	0	3.5(.89)	<b>17.8%</b>
Clean restrooms	17(37.8)	14(31.1)	12(26.7)	2(4.4)	0	4.0(.91)	<b>18%</b>
Ventilation and lighting	14(31.1)	5(11.1)	23(51.1)	2(4.4)	1(2.2)	3.6(1.04)	<b>20.8%</b>
<b>total axis</b>	<b>13.5(30)</b>	<b>5.6(12)</b>	<b>23.8(52)</b>	<b>1.3(2)</b>	<b>0.6(1)</b>	<b>3.6(0.97)</b>	<b>19.2%</b>
<b>All three axes</b>	<b>18(40)</b>	<b>5.6(12)</b>	<b>17.9(39)</b>	<b>1.4(3)</b>	<b>1.2(2)</b>	<b>3.8(8)</b>	<b>58%</b>

manner

Nursing takes care of the procedures necessary to prevent accidents ) ) ) maintain the safety of patients and	16(35.6)	7(15.6)	20(44.4)	1(2.2)	1(2.2)	3.8(1.03)	76%
<b>total axis</b>	<b>15(33)</b>	<b>6.2(13)</b>	<b>21(45)</b>	<b>1.4(3)</b>	<b>0.5(1)</b>	<b>3.7(1)</b>	<b>75%</b>

**Table 2**

Shows three domains about how the midwife communicate with the mother and her family, its consist from 11 items, respectively the second domain about mother satisfaction about midwifery

professional intervention its consist from 7 items the last one environment component as patient bed, bath room, lightening and ventilation

First domain take 57% excellent ,19% good and 6% is very bad impression about midwife communication and need to improve, while 60% of the participants admitted to department within appropriate way and 48.9% of them show the general appearance of midwife was good. Further, about 51.1% has excellent degree for the midwife introduce herself to participant. 62.2% from participant thank the midwife for the way of communication Conversely 8.9% said this is bad way but the reaction of participant 60% about the midwife answers any question for the mother also the midwife had smile and quiet and polite. Approximately, 62.2% of the participants thanks midwife for rapid response of midwife for any reaction from the mother explain any nursing procedure and provide privacy during examination, respectively. weighted mean % 80 Second domain shows patient satisfaction about midwifery professional intervention ,33% had excellent reaction ,45% good, 1% very bad reaction , respectively. weighted mean 75% . the highest degree 37.8% about take vital sign and response to any question, the majority 48.9%-53.3% has good about all items in second domain Third domain composed of patient bed, bath room, cleaning ,lightening and ventilation.

All excellent answer of the participant from 20%-35.6%, the lowest degree about room cleaning, while the item for all domain take 52%,30%,12% in the order good, excellent, very good. its take the lowest weighted mean 58%

**Table (3) Questionnaire items**

<b>Assessment of patient unit preparedness</b>	Yes	Partially	No	Mean±SD	Weighted mean
The bed is clean	21(46.7)	1(2.2)	23(51.1)	2.0±.99	<b>66%</b>
Bed linen provided	22(48.9)	3(6.7)	20(44.4)	1.9±.97	<b>63%</b>
There is a bed for the baby	25(55.6)	2(4.4)	18(40)	1.84± .97	<b>61%</b>
Availability of IV stand for fluid	14(31.1)	12(26.7)	19(42.2)	2.11±.85	<b>70%</b>
Availability of planning device when needed	15(33.3)	13(28.9)	17(37.8)	2.04±.85	<b>68%</b>
Supplies are available	14(31.1)	2(4.4)	1(2.2)	1.2±.56	<b>40%</b>

patient unit	12(26.7)	3(6.7)	2(4.4)	1.4±.71	<b>46%</b>
<b>Total</b>	<b>13.5(30)</b>	<b>5.6(12)</b>	<b>23.8(52)</b>	<b>1.3(2)</b>	<b>19.2%</b>

**Table 3**

On the other hand, when we assessed the preparedness of patient unite, question about baby coat was elected as the highest percentage (55.6%), followed by question four which asked about that the bed is clean (46.7%). However, the lowest percentage was noted in question seventh which demonstrated that patient unit (suction, oxygen, light) preparedness (26.7%), followed by question fourth and sixth that asked about if there's IV stand and medical supply available (31.1%). ALL items of domain had 52% of unavailable of patient item, 30% available followed by partially available 12% while weight mean 19.2%.

### Results

- 1- A total of 100 mothers who delivered at Gaza Strip Hospital within the last three months participated in the study.
- 2- Table 1 shows the demographic characteristics of the participants. The majority was between 26-30 years old (45%), married (95%), and had at least a secondary level of education (70%). Most participants resided in Gaza governorate (56%) and had a normal vaginal delivery (78%).
- 3- Table 2 presents the results of the maternal satisfaction questionnaire across the three domains. Regarding communication with healthcare providers, 90% of mothers reported being greeted respectfully by staff. However, 12% felt they did not receive sufficient explanation about procedures. For nursing care aspects, 95% felt assessments were conducted politely but 7% wanted more frequent updates on their condition and baby. Concerning facility environment, 80% found the rooms clean and comfortable while 15% faced issues with washroom cleanliness.
- 4- The overall maternal satisfaction score was calculated based on responses. The mean score was 75 out of 100 (SD 10), indicating a relatively high level of satisfaction. Satisfaction was significantly associated with education level ( $p=0.04$ ) and mode of delivery ( $p=0.01$ ), with more educated and cesarean mothers reporting lower satisfaction. No significant associations were found with other demographic factors.

### Conclusion and Recommendations

This study provides useful insights into maternal perceptions of health services received during childbirth at Gaza Strip Hospital. While the overall satisfaction level was high, some areas for improvement were identified.

- 1) We recommend enhancing patient-staff communication through clearer explanations, more frequent updates, and ensuring respectful care.
- 2) Improving facility cleanliness, particularly of washrooms, may further boost satisfaction.
- 3) Developing strategies to meet the needs of more educated mothers and cesarean patients deserves attention.
- 4) Regular assessment of maternal feedback can help healthcare providers continuously enhance the childbirth experience.
- 5) Addressing factors influencing satisfaction may ultimately improve maternal and newborn health outcomes.
- 6) Larger representative studies are warranted to generalize findings.
- 7) Improve communication: Good communication between healthcare providers and patients is crucial in ensuring patient satisfaction. Encourage doctors and nurses to listen actively to patients and explain things clearly and in an understandable manner.
- 8) Enhance patient education: Provide educational materials and classes for expectant mothers and their partners. This can include topics such as prenatal care, childbirth, breastfeeding, and newborn care.
- 9) Increase availability of staff: Make sure there are enough healthcare providers to attend to the needs of patients. This can involve hiring more staff, particularly during peak periods.
- 10) Foster a comfortable environment: The environment of the maternity department can play a significant role in patient satisfaction. Ensure the department is clean and comfortable, with adequate privacy and amenities for patients and their families.
- 11) Implement patient-centered care: Patient-centered care involves putting the patient's needs and preferences at the center of the care process. Healthcare providers should involve patients in decision-making and respect their values and beliefs.
- 12) Follow-up care: Provide follow-up care after patients leave the maternity department to ensure they receive continued support and assistance with any postpartum concerns.
- 13) Overall, by focusing on improving communication, patient education, staffing levels, the environment, patient-centered care, and follow-up care, you can increase patient satisfaction in the maternity department.

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